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Application Number 10/521,313

Filling Date January 14, 2005

First Named Inventor Joan Youb LRE

Art Unit 1663

Examiner Name Hill, Kevin Kai

Attorney Cocket Number 2298.0080001

I hereby revoke all previous powers of attorney given in the above-identified application.										
A Power of Attorney is submitted herewith.										
OR I hereby	appoint th	e practitionets as	eccioled with th	e Customer Number	26111					
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 26111										
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Applicant/Inventor. Assignee of record of the entire interest, See 37 CFR 3,71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
SIGNATURE OF Applicant of Assignee of Report										
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